

**Ombudsman Volunteer Recruitment Initiative
Monthly Expenditure Report and Request for Funds
Submit by the 30th of Each Month by E-mail**

Contractor Name (AAA):			
Street Address:			
City, State, ZIP:			
Prepared By:		Telephone #:	
Date:	Fiscal Year:	Contract No:	PSA #:

Part I. EXPENDITURES	Month:	Year:	
Cost Categories	(a) Budget	(b) Current Month	
1. Personnel			
2. Training			
3. Travel			
4. Equipment			
5. Volunteer Recognition			
6. Operating Expenses			
7. Total Costs	0	0	

Part I Instructions:

In column (a), list the budget line item amounts. Total costs in column (a) may not exceed the total allocation from the Federal Citation Penalty Account as shown in the latest Title III/VII Budget Display. Total funding from the Federal Citation Penalties Account and Total Costs in column (a) must be equal.

Budget figures can be changed at any time with written notice to, and approval of, the Office of State Long-Term Care Ombudsman (OSLTCO).

In column (b), report expenditures for the current month.

Part II. REQUEST FOR FEDERAL CITATIONS PENALTY ACCOUNT FUNDS						
Quarter: (Check One)	<input type="checkbox"/> 1st Qtr	<input type="checkbox"/> 2nd Qtr	<input type="checkbox"/> 3rd Qtr	<input type="checkbox"/> 4th Qtr		Fiscal Year:
Fund					(c) Amount	
8. Federal Citation Penalty Account						

Part II Instructions:

Federal Citation Penalty Account funds are advanced quarterly and AAAs may request up to 25% of the total allocation each quarter.

For State Use Only			
Ombudsman Analyst:	Date:	Ombudsman Team Coach:	Date: